Ref/ESI

ESI

CAG

MHI/DP/2022/104

Medway Hos
The way to better
(A Unit of United Alliance Healthc

BILLING CARD
SAFETY FIRST

Medway Heart Institute
Where heart beat never stops...

Patient Name: Mr.BABU B (ESI)
47/Male/MHI02486225
07/10/2024/IP1I2024002368
Dr.G. GNANAVELU

IP No. _____

Room No. _____

D.O.A. 07/10/24 Time 11:43 AM

TRANSFER DETAILS

Rent Per Day RL

Date	Time	From	To	Nurse's Signature
7/10/24	11:45	Admission	RL	
7/10/24	13:20	RL	CATH LAB	
7/10/24	14:35	CATHLAB	RL	

OPERATION THEATRE

Date : 07/10/24
Surgeon : Dr. Gnanavelu. G
I Asst. Surgeon :
II Asst. Surgeon :
III Asst. Surgeon :
Anaesthetist :
OT Nurse : R/N. Bavadharani
Name of Surgery : CAG

OT No. : CATHLAB-1
Start Time : 14:05
End Time : 14:25
Dis. Pack :
Diathermy :
C-Arm :
Arthroscopy :
Laproscopy :
Sevoflurane / Isoflurane :
Inj. Fentanyl : 2ml 10ml/inj. monphi:
Others :

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED

Date	Start	Date	Disconnect

SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date

PHARMACY	AMBULANCE
OT DRUGS REPLACED : BILL CLEARED : 10029 / Sarath 7/10/2024 RETURNS CHECKED :	T-11,903

CROSS MATCHING :

RESERVATION PF BLOOD :

STERILE TRAY USED :

TRANFUSION (BLOOD)

ATTENDER'S HOLDING :

OTHER PROCDURES :

Admission Officer : JANANI

Sister In-charge

(Form P-1)

Employees State Insurance Corporation

KK Nagar Chennai, TN (ESIC Model Hosp.)

Referral Letter

DO NOT MUTILATE THE QR CO

D.... 6323834

Referral No	: Tamil2024051553	**Insurance No/Staff/ Pensioner Card**	: 5128319632
Name of the Patient	: Mr. Babu B	**Age/Gender** : 47 Years /Male	**UHID** : HKKN.0000220810
UAN of IP	:		
Address/Contact No	:		
Identification marks (if any)	:		
IP/Beneficiary/Staff	: Beneficiary		
Relationship with IP/Staff	: Spouse		
Entitled for Specialty Rx	: YES		
Entitled Super Specialty Rx	: YES		
Diagnosis	: ICD - Atherosclerotic heart disease - I25.1 Remarks :		
CGHS (Name and Code)*	: 601 - Coronary angiography - Cardiovascular and Cardiac Surgery Procedures / Treatment / Investigations - No Of Sessions Allowed - 1 - Validity Upto - 14-Oct-2024		

Remarks Additional Clinical Information/Procedure/Investigation

Reasons / Purpose for Referral Investigations/Rx/Procedure : lack of facility

Name of the empanelled hospital whereto refer **Hospital** MEDWAY HOSPITALS

Department Cardiology

Dr. K.V. BALIGA, M.D.,(MED),D.M.,(Nephro) Professor & HOD General Medicine E.S.I.C. Medical College & Hospital K.K.Nagar, Chennai-78.

Date & Time of Referral : 04-Oct-2024 04:05:24 PM

Name and Designation of the Referring Doctor
Dr. Krishna VEnkatesh Baliga - PROFESSOR

Or,Agreeing to / contradicting the above, I voluntarily choose MEDWAY Hospital for treatment of self or for my Spo (relationship).

Date and Time: 5/10/24

B. Poongavanam

Signature/Thumb Impression of IP/Beneficiary/Staff

Referred to ______ Department of ______ Hospital/Diagnostic

Centre for ______ (Reason/purpose for referral).

(VERIFIED & RECOMMENDED BY)
(Signature, Name &Designation)
Date & Time:

J. THAMIZHCHELVI 5/10/24

(AUTHORISED SIGNATORY WITH STAMP)
(Signature, Name &Designation)
Date & Time:

MEDICAL SUPERINTENDENT E.S.I.C. HOSPITAL K.K. NAGAR, CHENNAI-600 078.

N.B.
The entitlement eligibility of the patient should also be verified through IP Portal at www.esic.in. Referral shall be governed by the rules and administrative instructions issued from time to time.Referred Hospital is instructed to perform only those procedure/treatment for which the patient has been referred to. In case any additional procedure / treatment /investigation is essentially required to be carried out, permission for the same is mandatorily required from the approving authority of the referring hospital. The validity of this referral is upto 7 days from the date of issuance or as per the contract whichever is later and is subject to fulfilment of other terms and conditions as defined in the contract/agreement.

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04-10-202

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